Fill	in this information to identify	vour case:								
	,	d R. Siegler								
		Theresa Siegler								
Uni	ted States Bankruptcy Court	for the: EASTERN DISTR PHILADELPHIA D	CICT OF PENNSYLVAN DIVISION	IA,	_					
Cas	se number 16-17035					Check if this is: An amended filing				
(If kn	nown)									
						A supplement showing postpetition chapter 13 income as of the following date:				
O_1	fficial Form 106l					MM / DD/ Y	YYY			
S	chedule I: Your	Income							12/15	
supį spoi attad	as complete and accurate as plying correct information. I use. If you are separated anch a separate sheet to this formation. Describe Employers.	If you are married and not d your spouse is not filing orm. On the top of any add	filing jointly, and your with you, do not inclu	spouse is I de informat	iving with tion about	you, includ your spou	le informationse. If more s	on about yo space is nee	our eded,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filin	ng spouse		
	If you have more than one jo	b,	☐ Employed	☐ Employed			☐ Employed			
	attach a separate page with information about additiona employers.	Employment statu	■ Not employed	■ Not employed			■ Not employed			
		Occupation								
	Include part-time, seasonal self-employed work.	Employer's name	-							
	Occupation may include stu homemaker, if it applies.	ident or Employer's addre	ss							
		How long employe	ed there?			_				
Par	t 2: Give Details Abou	ut Monthly Income								
	mate monthly income as of ss you are separated.	the date you file this form	. If you have nothing to re	eport for any	line, write \$	60 in the spa	ace. Include y	your non-filin	g spouse	
	u or your non-filing spouse have, attach a separate sheet to t		combine the information	for all employ	yers for that	t person on	the lines belo	ow. If you nee	ed more	
					For De	ebtor 1	For Debto			
2.	List monthly gross wages deductions). If not paid mor			2.	\$	0.00	\$	0.00		
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	0.00		
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	0.00	\$	0.00		

Official Form 106l Schedule I: Your Income page 1

Debto Debto		Siegler, Edward R. & Siegler, Theresa	_	Case r	number (if known)	16-17035		
				For	Debtor 1	For Debtor		
	Сор	y line 4 here	4.	\$	0.00	\$	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	<u>\$</u> —	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	<u>\$</u> —	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	<u>\$</u> —	0.00	\$	0.00	
	5e.	Insurance	5e.	<u>*</u> —	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	
ŝ.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	<u>\$</u> —	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$ \$	800.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	800.00	
10	Cala	aulate monthly income. Add line 7 u line 0	10. \$		0.00 + \$	800.00	= \$	000.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. 5		0.00 + \$_	800.00	= \$	800.00
	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your dear friends or relatives. The property of the expenses that you list in Schedule and the	ependen	.,	,		+\$	0.00
	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.							800.00
13.	Do y	you expect an increase or decrease within the year after you file this form?	?				Combine monthly	
		No.						